

DOCKET NO: TRE-1-CPPPP

DECLARATION AND POWER OF ATTORNEY FOR U.S. PATENT APPLICATIONS

(XX) Original () Supplemental () Substitute () PCT

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Cytostatic Factor

which is described and claimed in:

- [] the attached specification, or
[XX] the specification in application Serial No. 07/936,167
filed August 27, 1992 entitled Cytostatic Factor
and with amendments through (if applicable),
[] the specification in International Application No. PCT/
_____, filed _____, and as amended
on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with 37 C.F.R. Sec. 1.56(a).

I hereby claim foreign priority benefits under 35 U.S.C. Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate relating to this subject matter having a filing date before that of the application on which priority is claimed:

<u>COUNTRY</u>	<u>APPL. NO.</u>	<u>FILING DATE</u>	<u>PRIORITY CLAIMED</u>
_____	_____	_____	[] YES [] NO
_____	_____	_____	[] YES [] NO
_____	_____	_____	[] YES [] NO
_____	_____	_____	[] YES [] NO

I hereby claim the benefit under 35 U.S.C. Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of 35 U.S.C. Section 112, I acknowledge the duty to disclose material information as defined in 37 C.F.R. Section 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

SERIAL NO.	FILING DATE	STATUS		
<u>07/354,330</u>	<u>5/19/89</u>	<input type="checkbox"/> Patented	<input type="checkbox"/> Pending	<input checked="" type="checkbox"/> Abandoned
<u>07/508,999</u>	<u>4/12/90</u>	<input type="checkbox"/> Patented	<input type="checkbox"/> Pending	<input checked="" type="checkbox"/> Abandoned
<u>07/525,274</u>	<u>5/17/90</u>	<input type="checkbox"/> Patented	<input type="checkbox"/> Pending	<input checked="" type="checkbox"/> Abandoned
<u>07/766,433</u>	<u>9/26/91</u>	<input type="checkbox"/> Patented	<input checked="" type="checkbox"/> Pending	<input type="checkbox"/> Abandoned
<u> </u>	<u>7/17/92</u>	<input type="checkbox"/> Patented	<input checked="" type="checkbox"/> Pending	<input type="checkbox"/> Abandoned

I hereby appoint the following attorneys and agents, each of them with full power of substitution, revocation and appointment of associates, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Irving N. Feit, Reg. No. 28,601, Eric J. Sheets, Reg. No. 30,326 and Laura S. Weiss, Reg. No. 34,750.

Address all telephone calls to: Irving N. Feit at 212-645-1405.

Address all correspondence to: Irving N. Feit, ImClone Systems, Inc., 180 Varick Street, New York, N.Y. 10014.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. Section 1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: Avi Treves

Inventor's signature: A. Treves Date: Sep. 3 92

Residence: Bar-Kochva 57 P.O. Box Address:
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Citizenship: Israel

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Full name of second joint inventor, if any: Vivian Barak

Inventor's signature: Barak Vivian Date: Sep. 3. 92

Residence: Hertzel St. 103 P.O. Box Address: _____
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Full name of third joint inventor, if any:

Inventor's signature: _____ Date: _____

Residence: _____ P.O. Box Address: _____

Citizenship: _____

Full name of fourth joint inventor, if any:

Inventor's signature: _____ Date: _____

Residence: _____ P.O. Box Address: _____

Citizenship: _____

Full name of fifth joint inventor, if any:

Inventor's signature: ~~Barak Vivian~~ Date: ~~Sep 1 92~~

Residence: _____ P.O. Box Address: _____

Citizenship: _____